

	Dental Plan 1 ♦	Dental Plan 4	Dental Plan 8 ‡
Dental Plans	Moda Health (ODS)	Moda Health (ODS)	Willamette Dental
Dental Office Visit Copayment	NA	NA	\$20*
Benefit Maximum	\$2,200	\$1,500	NA
Deductible	\$50	\$50	NA
Plan Year Maximum	\$2,200	\$1,500	NA
<b>Preventive and Diagnostic Services*</b>	Deductible Waived for Preventive & Diagnostic Services on		
Oral exams, X-rays, cleaning (prophylaxis), fluoride treatments, and space maintainers	70% + 10% each Plan Year	100%	100%*
<b>Restorative Services*</b>			
Routine fillings, inlays and stainless steel crowns	70% + 10% <sup>1</sup> each Plan Year	80% <sup>1</sup>	100% <sup>2*</sup>
<b>Simple Extraction*</b>			
Simple tooth extractions	70% + 10% each Plan Year	80%	100%*
<b>Oral Surgery*</b>			
Surgical tooth extractions, including diagnosis and evaluation	70% + 10% each Plan Year	80%	100%*
<b>Periodontics*</b>			
Diagnosis, evaluation, and treatment of gum disease including scaling and root planing	70% + 10% each Plan Year	80%	100%*
<b>Endodontics*</b>			
Root canal and related therapy including diagnosis and evaluation	70% + 10% each Plan Year	80%	100%*
<b>Major Restorative Services*</b>			
Gold or porcelain crowns and onlays	70% + 10% each Plan Year	80%	100%*
Implants	70% + 10% each Plan Year	50%	See Certificate of Coverage for copays
<b>Fixed and Removable Prosthetic Services*</b>			
Full and partial dentures, relines, rebases	70% + 10% each Plan Year	50%	100%*
Bridge retainers and pontics	70% + 10% each Plan Year	50%	100%*
<b>Orthodontics * (All plans except ODS Dental Plan 6)</b>			
<b>Orthodontic Treatment</b>	80% to \$1,800 lifetime max	80% to \$1,800 lifetime max	\$1,500 copay + \$20 per visit**

♦ Under MODA Plan 1, benefits start at 70% the first plan year then increase by 10% each plan year (up to a maximum of 100%) provided the individual has visited the dentist at least once during the previous plan year. Switching between incentive plan 3 and non-incentive plans (4 and 8) will have an effect on benefit level.

‡ Under Willamette Dental Plan 8, services must be provided by a Willamette Dental contracted provider in order for benefits to be payable. See handbook for details.

\* For Willamette Dental Plan 8: Office visit copayment applies at each visit, in addition to any plan copayments for